Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

## Filing at a Glance

Company: Loyal American Life Insurance Company

Product Name: Loyal American Website SERFF Tr Num: UTAC-127329307 State: Arkansas
TOI: MS08I Individual Medicare Supplement - SERFF Status: Closed-Filed-State Tr Num: 49585

TOI: MS08I Individual Medicare Supplement - SERFF Status: Closed-Filed-Standard Plans 2010 Closed

Sub-TOI: MS08I.001 Plan A 2010 Co Tr Num: LOYAL-11-0004 State Status: Filed-Closed

Filing Type: Advertisement Reviewer(s): Stephanie Fowler

Authors: Melissa MacLaurin, Julie Disposition Date: 09/08/2011

Cook

Date Submitted: 08/17/2011 Disposition Status: Filed-Closed

Implementation Date Requested: On Approval Implementation Date:

State Filing Description:

## **General Information**

Project Name: Loyal Medicare Supplement Status of Filing in Domicile: Pending

Project Number: LOYAL-11-0004

Requested Filing Mode: Review & Approval

Explanation for Combination/Other:

Domicile Status Comments:

Market Type: Individual

Individual Market Type:

Overall Rate Impact: Filing Status Changed: 09/08/2011

State Status Changed: 09/08/2011

Deemer Date: Created By: Melissa MacLaurin

Submitted By: Melissa MacLaurin Corresponding Filing Tracking Number:

Filing Description:

Loyal American Life Insurance Company NAIC: 65722 FEIN: 63-0343428

Requesting Approval for Medicare Supplement Website:

Form Number Form Description

LOYAL-11-0004-A Loyal American Website – Home Page LOYAL-11-0004-B Loyal American Website – About Us

LOYAL-11-0004-C Loyal American Website – About Us – Financial Strength

LOYAL-11-0004-D Loyal American Website – About Us – Why Loyal?

LOYAL-11-0004-E Loyal American Website – Medicare Supplement Ins.

LOYAL-11-0004-F Loyal American Website – Medicare Supplement – Loyal

Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

LOYAL-11-0004-G Loyal American Website – Medicare Supplement – Part A LOYAL-11-0004-H Loyal American Website – Medicare Supplement – Part B LOYAL-11-0004-I Loyal American Website – Medicare Supplement – Part C LOYAL-11-0004-J Loyal American Website – Medicare Supplement – Part D

LOYAL-11-0004-K Loyal American Website – Loyal American Medicare Supplement

LOYAL-11-0004-T Loyal American Website – Contact Us LOYAL-11-0004-U Loyal American Website – Get A Quote

LOYAL-11-0004-X Loyal American Website – Message from the President

LOYAL-11-0004-Z Loyal American Website – Loyal Med Supp Exclusions and Limitations

The website is to be used with Medicare Supplement policies described below:

Form: Form Number: Serff Number:

Medicare Supplement Plan A Loyal-MS-CR-A-AR UTAC-126397388

Medicare Supplement Plan F Loyal-MS-CR-F-AR UTAC-126397388

Medicare Supplement Plan G Loyal-MS-CR-G-AR UTAC-126397388

Medicare Supplement Plan N Loyal-MS-CR-N-AR UTAC-126397388

-Approved 01/27/2010

Medicare Supplement Plan B Loyal-MS-CR-B-AR UTAC-126631994

Medicare Supplement Plan C Loyal-MS-CR-C-AR UTAC-126631994

Medicare Supplement Plan D Loyal-MS-CR-D-AR UTAC-126631994

-Approved 05/25/2010

Dear Analyst:

The website for the Medicare Supplement policies described above is submitted for your review and approval. This website is new and does not replace any forms previously approved by your department. The used with the policy forms described in this cover letter as well as any future approved plan types.

Please note this website is being filed in multiple states and we may add additional state specific language required by another department of insurance. Also a statement of variability is attached to this filing for informational purposes. The test site web address for this website should you want to review the entire website online is: loyal.gafrisupp.com. Once we have state approval, the website address will be www.loyalamerican.com.

Should you have any questions, please feel free to contact me at 866-459-4272, ext. 4794 or by email at mmacLaurin@gafri.com.

Sincerely,

Melissa MacLaurin,

Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

Sr. Compliance Filing Analyst

## **Company and Contact**

#### **Filing Contact Information**

Melissa MacLaurin, Compliance Analyst mmaclaurin@gafri.com 11200 Lakeline Blvd Ste 100 512-807-4794 [Phone]

Austin, TX 78717

**Filing Company Information** 

Loyal American Life Insurance Company CoCode: 65722 State of Domicile: Ohio 11200 Lakeline Blvd., Suite 100 Group Code: 84 Company Type: Insurance

Company

P.O. Box 559004 Group Name: State ID Number:

Austin, TX 78755-9004 FEIN Number: 63-0343428

(800) 633-6752 ext. [Phone]

-----

## **Filing Fees**

Fee Required? Yes Fee Amount: \$750.00

Retaliatory? No

Fee Explanation: \$50 per advertisement

\$50 X 15 ads = \$750

Per Company: No

COMPANY AMOUNT DATE PROCESSED TRANSACTION #

Loyal American Life Insurance Company \$750.00 08/17/2011 50699856

Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

## **Correspondence Summary**

## **Dispositions**

Status	Created By	Created On	Date Submitted
Filed-Closed	l Stephanie Fowler	09/08/2011	09/08/2011

Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

## **Disposition**

Disposition Date: 09/08/2011

Implementation Date: Status: Filed-Closed

Comment:

Rate data does NOT apply to filing.

Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

Schedule	Schedule Item	Schedule Item Status	Public Access
Supporting Document	Statement of Variability	Filed-Closed	Yes
Form	Loyal American Website – Home Page	Filed-Closed	Yes
Form	Loyal American Website - About Us	Filed-Closed	Yes
Form	Loyal American Website – About Us – Financial Strength	Filed-Closed	Yes
Form	Loyal American Website – About Us – Why Loyal?	Filed-Closed	Yes
Form	Loyal American Website – Medicare Supplement Ins.	Filed-Closed	Yes
Form	Loyal American Website – Medicare Supplement – Loyal	Filed-Closed	Yes
Form	Loyal American Website – Medicare Supplement – Part A	Filed-Closed	Yes
Form	Loyal American Website – Medicare Supplement – Part B	Filed-Closed	Yes
Form	Loyal American Website – Medicare Supplement – Part C	Filed-Closed	Yes
Form	Loyal American Website – Medicare Supplement – Part D	Filed-Closed	Yes
Form	Loyal American Website – Loyal American Medicare Supplement	Filed-Closed	Yes
Form	American Website - Contact Us	Filed-Closed	Yes
Form	Loyal American Website – Get A Quote	Filed-Closed	Yes
Form	Loyal American Website – Message from the President	Filed-Closed	Yes
Form	Loyal American Website – Loyal Med Supp Exclusions and Limitations	Filed-Closed	Yes

Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

## Form Schedule

Lead Form Number: LOYAL-11-0004-A

Schedule	Form	Form Type	Form Name	Action	Action Specific	Readability	Attachment
Item	Number				Data		
Status							
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-A		Website - Home				0004-A.pdf
09/08/2011			Page				
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-B		Website – About Us				0004-B.pdf
09/08/2011							
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-C		Website – About Us				0004-C.pdf
09/08/2011			<ul><li>Financial Strength</li></ul>				
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-D		Website – About Us				0004-D.pdf
09/08/2011			– Why Loyal?				
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-E		Website – Medicare				0004-E.pdf
09/08/2011			Supplement Ins.				
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-F		Website – Medicare				0004-F.pdf
09/08/2011			Supplement – Loyal				
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-G		Website – Medicare				0004-G.pdf
09/08/2011			Supplement – Part A				
Filed-	LOYAL-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	11-0004-H		Website – Medicare				0004-H.pdf
09/08/2011			Supplement – Part B				
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-I		Website – Medicare				0004-I.pdf
09/08/2011			Supplement – Part C				
Filed-	LOYAL-11-	Advertising	Loyal American	Initial			LOYAL-11-
Closed	0004-J		Website – Medicare				0004-J.pdf
09/08/2011			Supplement – Part D				

Company Tracking Number: LOYAL-11-0004

TOI: MS081 Individual Medicare Supplement - Sub-TOI: MS081.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

Filed- LOYAL-11- Advertising Loyal American Initial LOYAL-11-Closed 0004-K Website – Loyal 0004-K.pdf

09/08/2011 American Medicare

Supplement

Filed- LOYAL-11- Advertising American Website – Initial LOYAL-11-

Closed 0004-T Contact Us 0004-T.pdf

09/08/2011

Filed- LOYAL-11- Advertising Loyal American Initial LOYAL-11-

Closed 0004-U Website – Get A 0004-U.pdf

09/08/2011 Quote

Filed- LOYAL-11- Advertising Loyal American Initial LOYAL-11-

Closed 0004-X Website – Message 0004-X.pdf

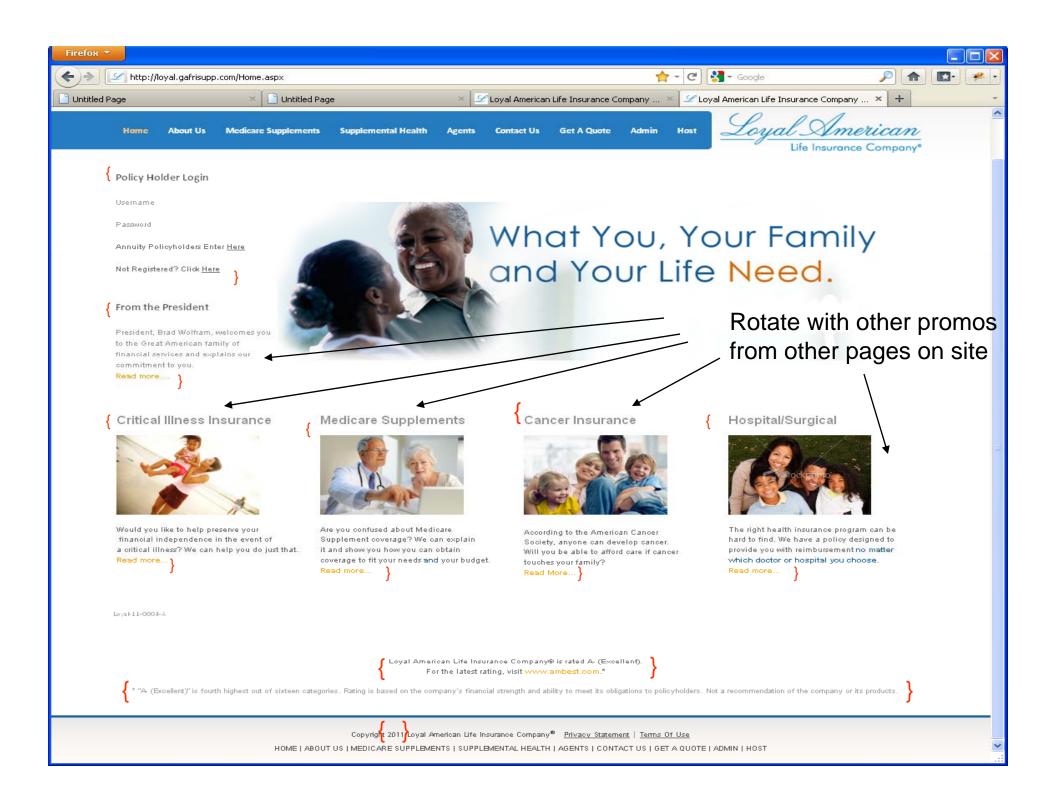
09/08/2011 from the President

Filed- LOYAL-11- Advertising Loyal American Initial LOYAL-11-

Closed 0004-Z Website – Loyal Med 0004-Z.pdf

09/08/2011 Supp Exclusions and

Limitations



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Supplemental Health

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Life Insurance Company



#### , Hospital/Surgical

Have you ever wondered how you would pay for medical expenses and out of-pocket costs that aren't covered by your regular medical insurance if you were to be hospitalized? We have products that can help.

Read more.



#### **About Us**

Since 1955, Loyal American Life Insurance Company (Loyal) has been marketing insurance products for the needs of Americans. We feature Medicare Supplement Insurance Plans and offer a selection of supplemental policies, marketed through agents, designed to help meet the financial needs of Americans as deductibles and coinsurance costs grow.

We strive to develop innovative products, quality services for our customers and to provide a variety of coverage options that work for you. At Loyal, we are committed to providing exceptional service to all our customers every day.

Loyal is part of the Great American family of companies. Learn about our Financial Strength.



The Great American Insurance Tower overlooking Great American Ball Park, home of the Cincinnati Reds

#### Our Family

Our family of companies includes: Central Reserve Life Insurance Company, Continental General Insurance Company, Loyal American Life Insurance Company, Provident American Life and Health Insurance Company and United Teacher Associates Insurance Company Our family of companies has helped serve over 1 million policy holders in just the past 10 years and we pay out over \$23 million in Medicare Supplement, Life, Long-Term Care and other health claims each month."



Loya F11-0004-B

\* 2010 Average of Medicare Supplement, Life, Long-Term Care, Cancer, Heart & Accident claims for Central Reserve Life, Continental General, Great American Life \* Loyal American Life, Provident American Life & Health and United Teacher

Associates Insurance Companies.

**Medicare Supplements** 

**Supplemental Health** 

**Get A Quote** 

Life Insurance Company®

## **Financial Strength**



American Financial Resources Inc. (GAFRI). GAFRI is a member of the Great American Insurance Group, whose roots go back to 1872 with the founding of its flagship company, Great American Insurance Company. The members of Great American Insurance Group are subsidiaries of American Financial Group, Inc. (AFG). AFG's common stock is listed and traded on the New York Stock Exchange and Nasdaq Global Select Market under the symbol AFG. Learn more at www.GAFRI.com.

Loyal American Life Insurance Company is part of the Great American Supplemental Benefits Group and is a member of Great



Loyal American Life Insurance Company is rated A- (Excellent) For the latest rating, access www.ambest.com.\*

## **Medicare Supplements**

Are you confused about Medicare Supplement coverage? We can explain it and show you how you can obtain coverage to fit you needs and your budget. Read mor

A Message From Our President: Brad Wolfram

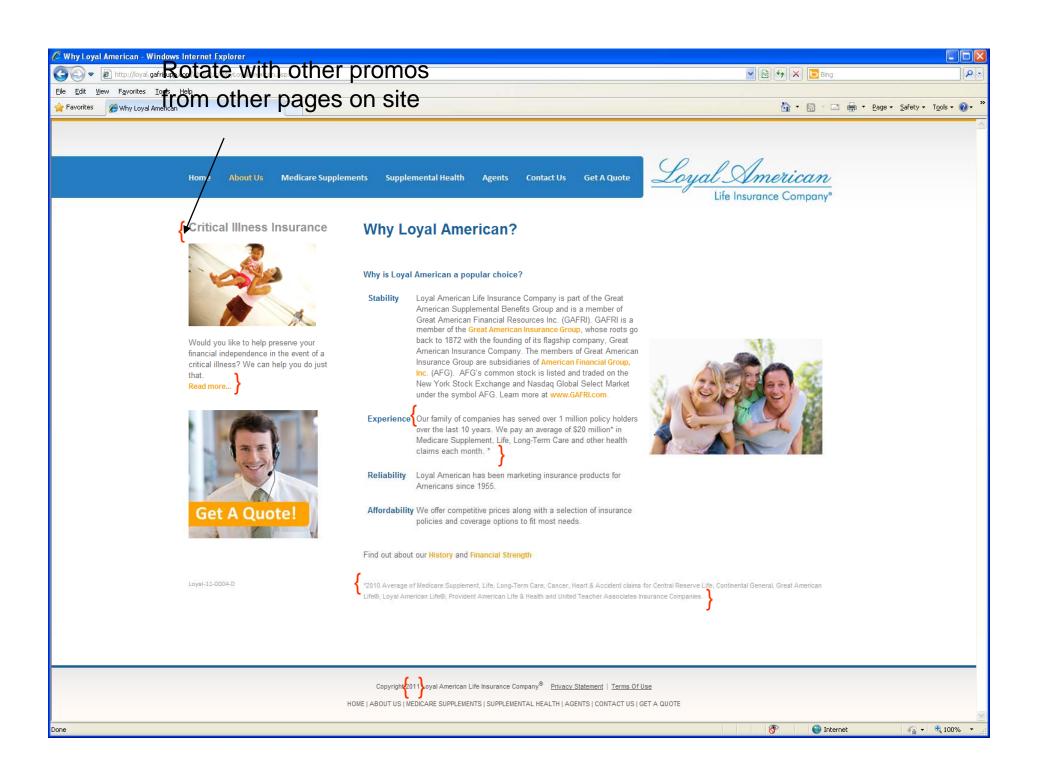
\* "A- (Excellent)" is fourth highest out of sixteen categories. Rating is based on the company's financial strength and ability to meet its obligations to policyholders. Not a recommendation of the company or its products

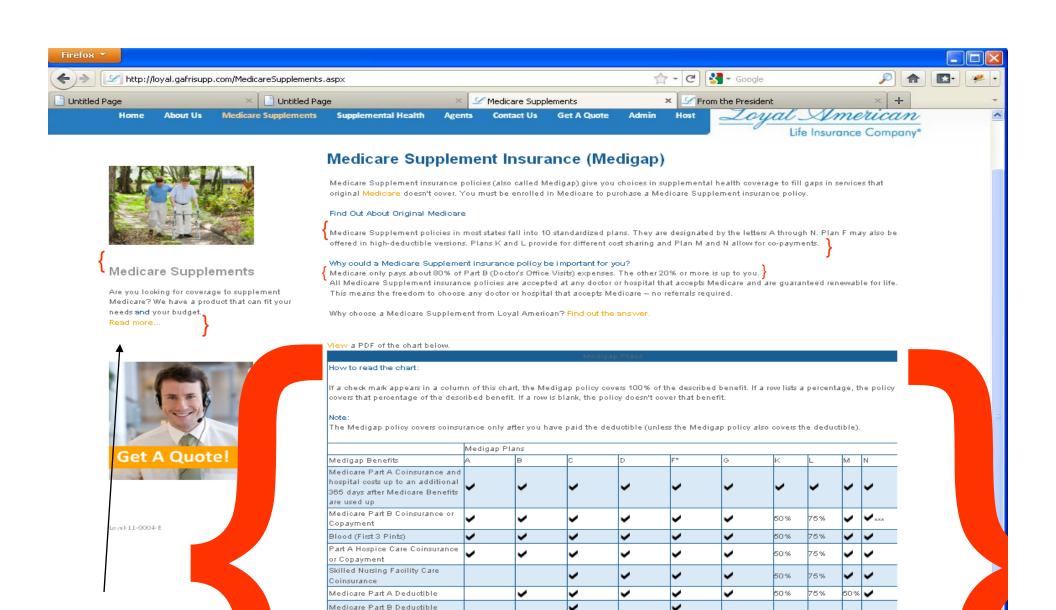
Rotate with other promos from other pages on site

Get A Quote!

Loval-11-0004-0







Rotate with other promosan Travel Emergency (Up to from other pages on site of the deductible plan. If you choose this option, this means you must pay for Medicare-other pages on site of the deductible amount of \$2,000 in 2011 before your Medigap plan pays anything.

Medicare Part B Excess Charges

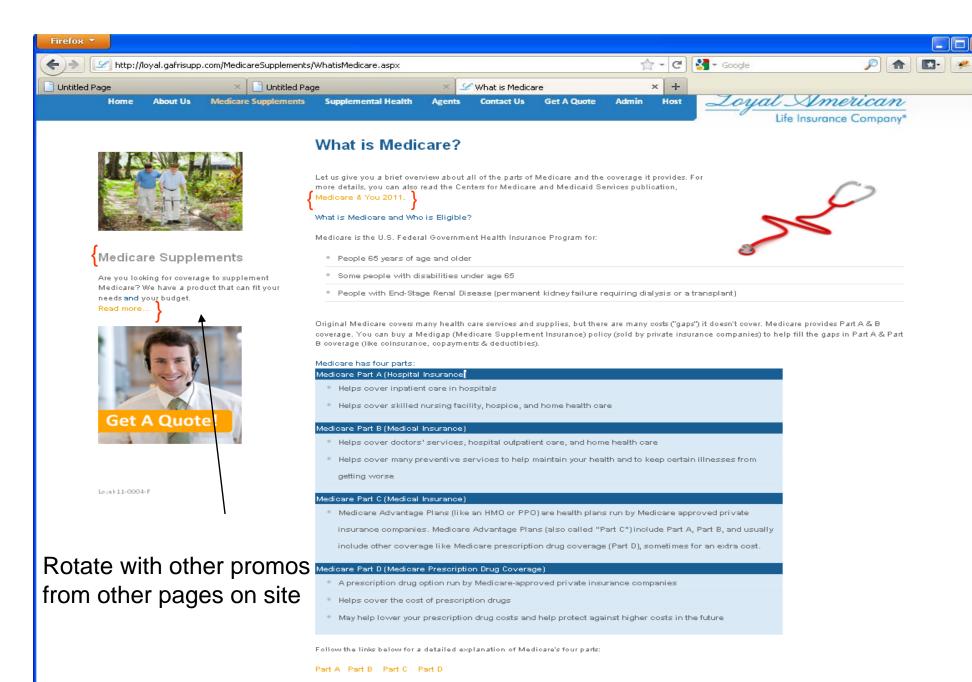
Out-of-Pocket Limit\*\* \$4,640 \$2,320

\*\*After you meet your out-of-pocket yearly limit and your yearly Part B deductible (\$162 in 2011), the Medigap plan pays 100% of covered services for the rest of the calendar year.

\*\*\*Plan N pays 100% of the Part B coinsurance, except for a copayment of up to \$20 for some office visits and up to a \$50 copayment for emergency room visits that don't result in an inpatient admission.

View PDF of the chart above.

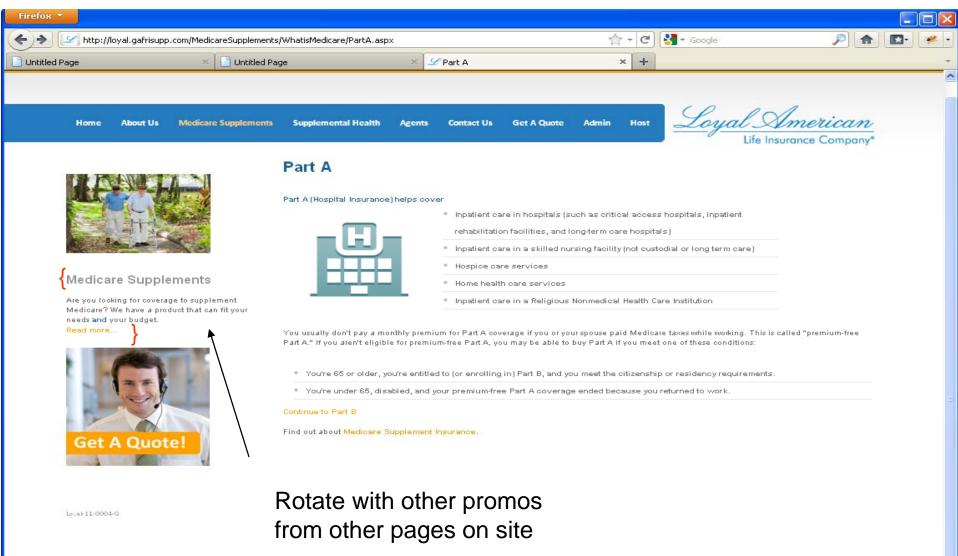
No insurance company or its agents are connected with or endorsed by Medicare, Social Security or any other governmental agency. This is a solicitation for insurance. Premium and benefits vary by plan	
selected. Plan availability varies by state. Medicare Supplement policies are underwritten by Loyal American Life Insurance Company. For specific costs and further details of the coverage, including exclusions and reductions or	
limitations and the terms under which the policy may be continued in force, contact the company. An insurance agent will contact you.	
Copyright (1011) Loyal American Life Insurance Company Privacy Statement   Terms Of Use  HOME   ABOUT US   MEDICARE SUPPLEMENTS   SUPPLEMENTAL HEALTH   AGENTS   CONTACT US   GET A QUOTE   ADMIN   HOST	
HOME   ABOUT US   MEDICARE SUPPLEMENTS   SUPPLEMENTAL HEALTH   AGENTS   CONTACT US   GET A QUOTE   ADMIN   HOST	~



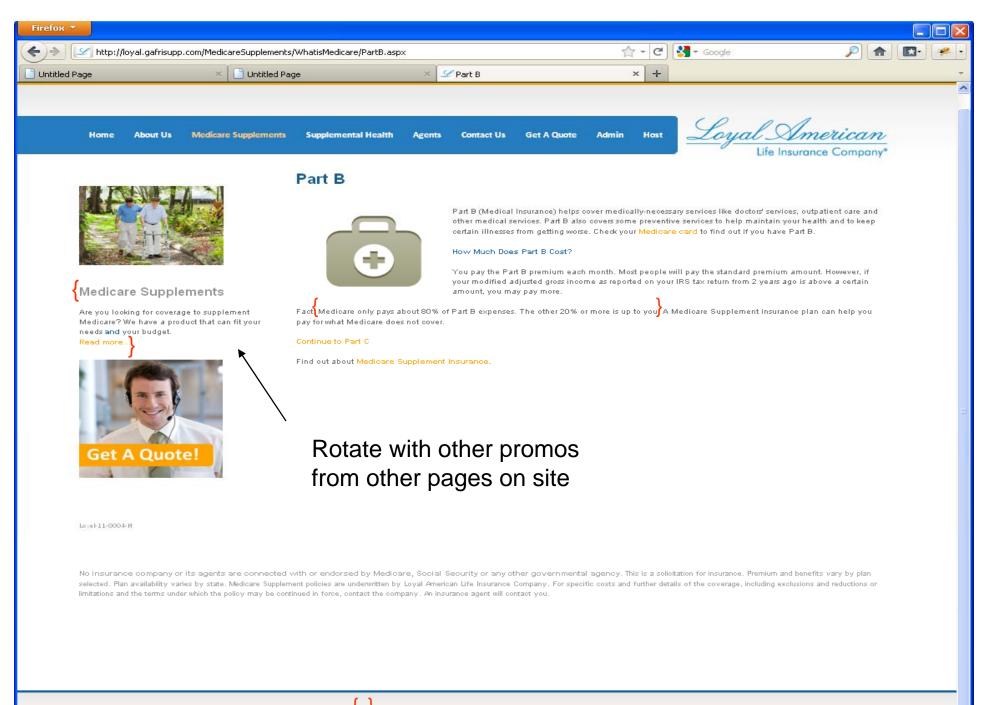
Find out about Medicare Supplement Insurance

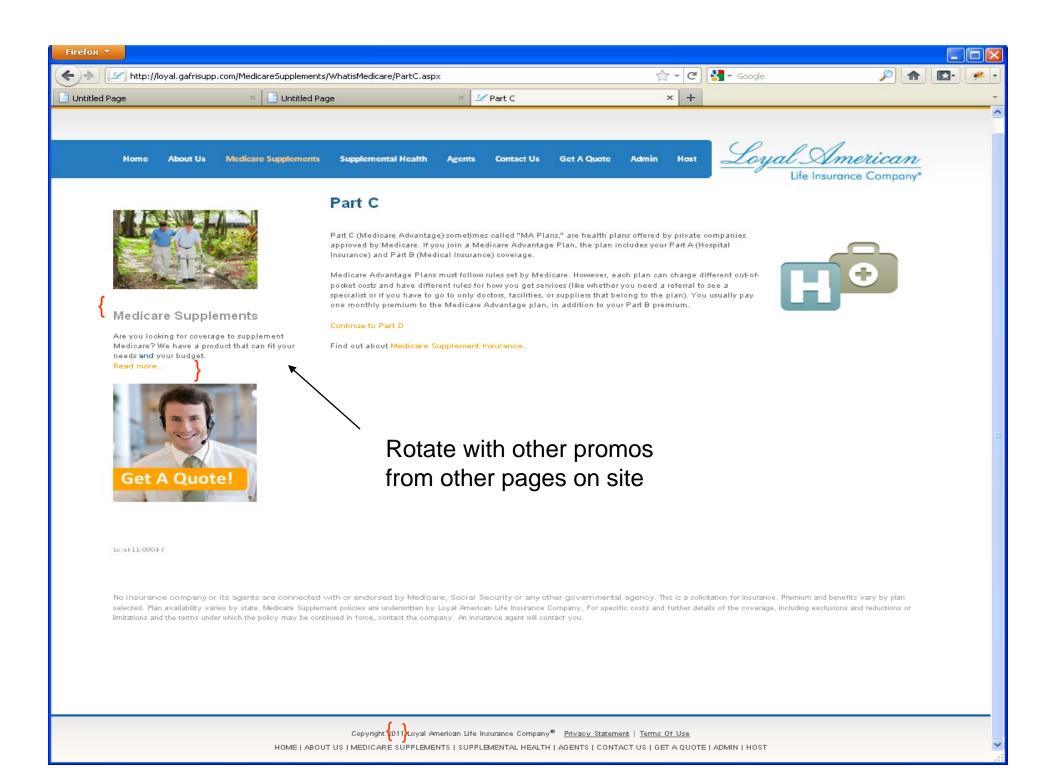
No insurance company or its agents are connected with or endorsed by Medicare, Social Security or any other governmental agency. This is a solicitation for insurance. Premium and benefits vary by plan selected. Plan availability varies by state. Medicare Supplement policies are underwritten by Loyal American Life Insurance Company. For specific costs and further details of the coverage, including exclusions and reductions or limitations and the terms under which the policy may be continued in force, contact the company. An insurance agent will contact you.

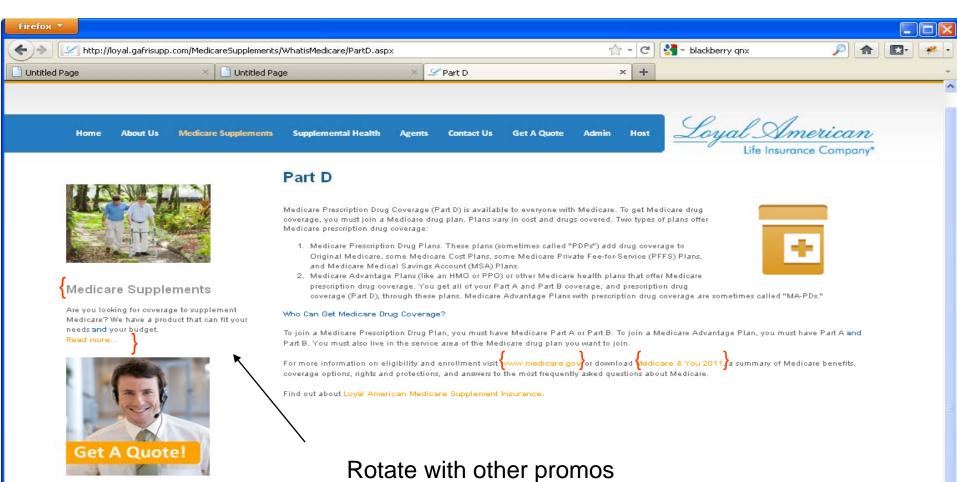
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Copyright <mark>(</mark> 011 <mark>)</mark> Loyal American Life Insurance Company <sup>®</sup> <u>Privacy Statement</u>   <u>Terms Of Use</u>	
HOME   ABOUT US   MEDICARE SUPPLEMENTS   SUPPLEMENTAL HEALTH   AGENTS   CONTACT US   GET A QUOTE   ADMIN   HOST	~



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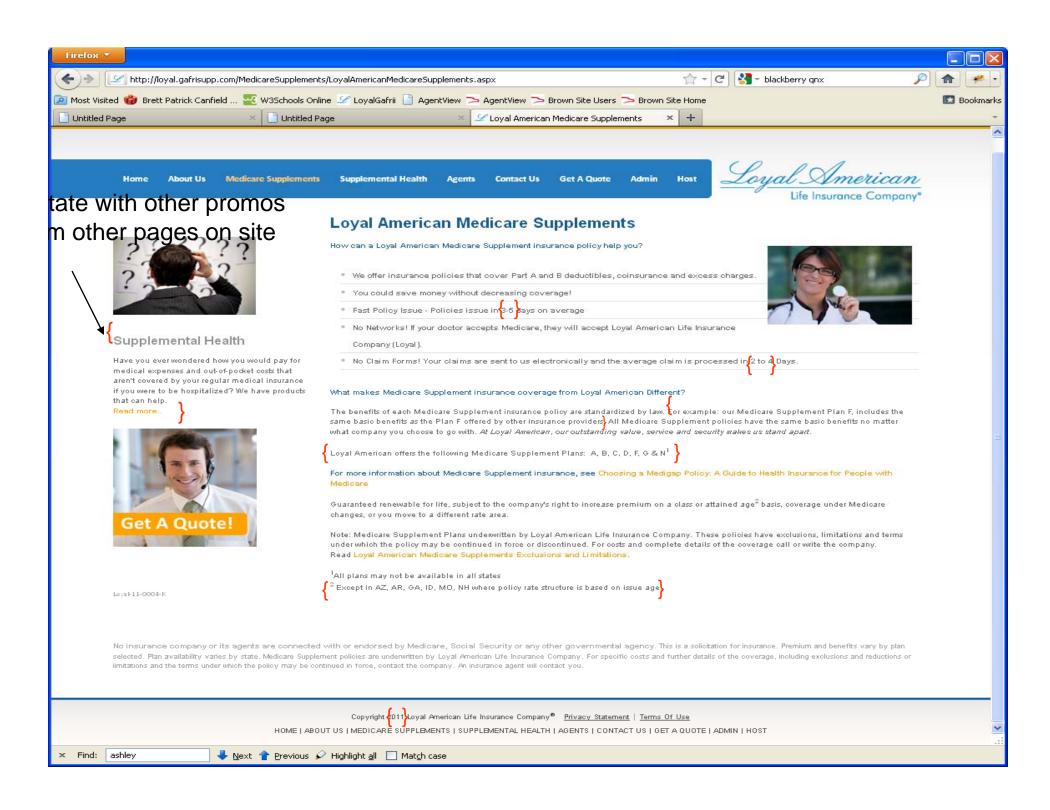


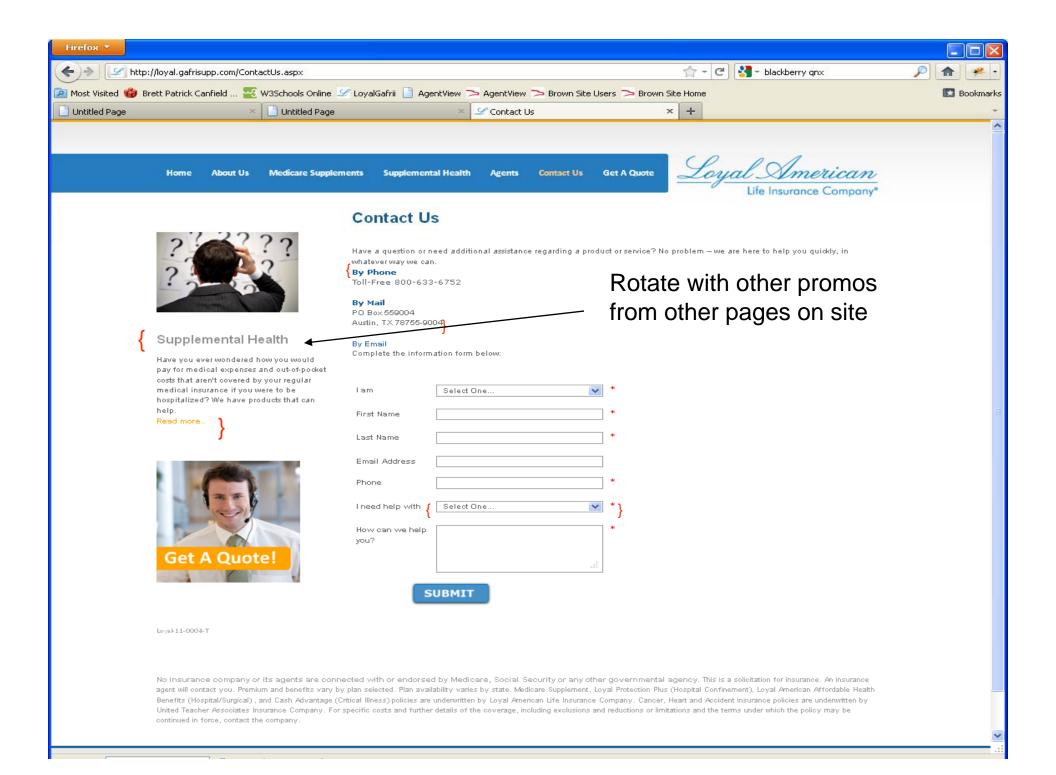


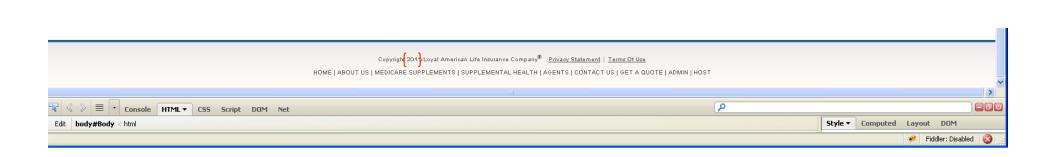
# Rotate with other promos from other pages on site

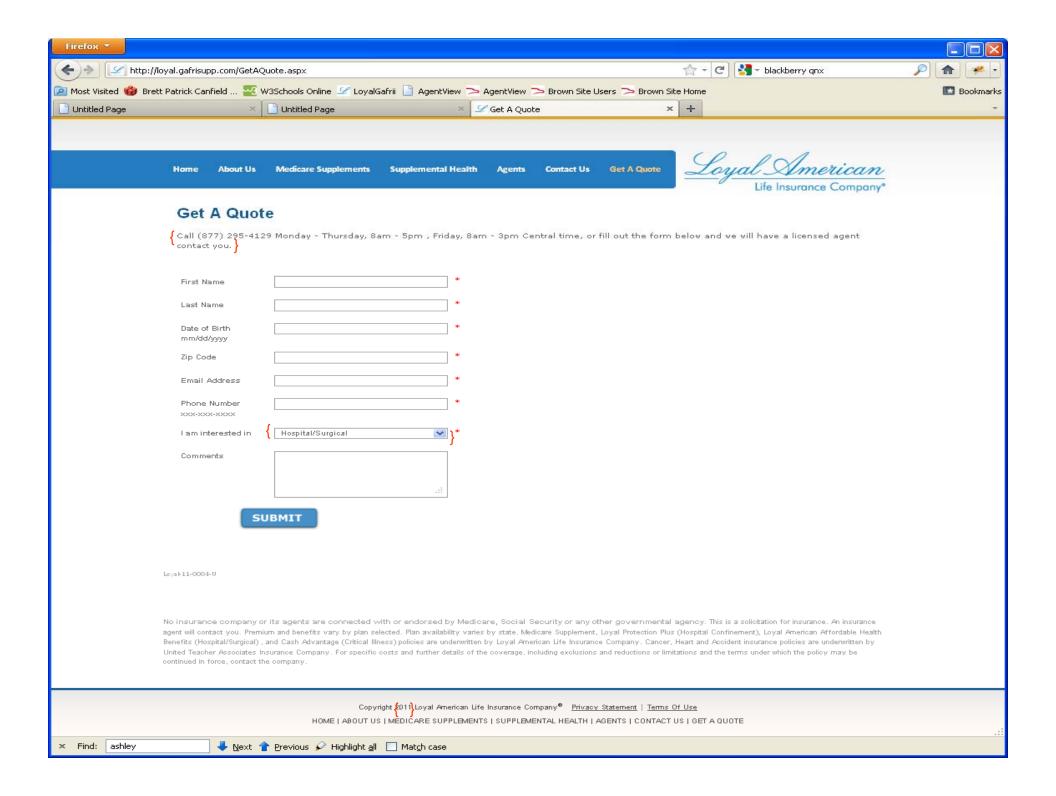
Loyal-11-0004-J

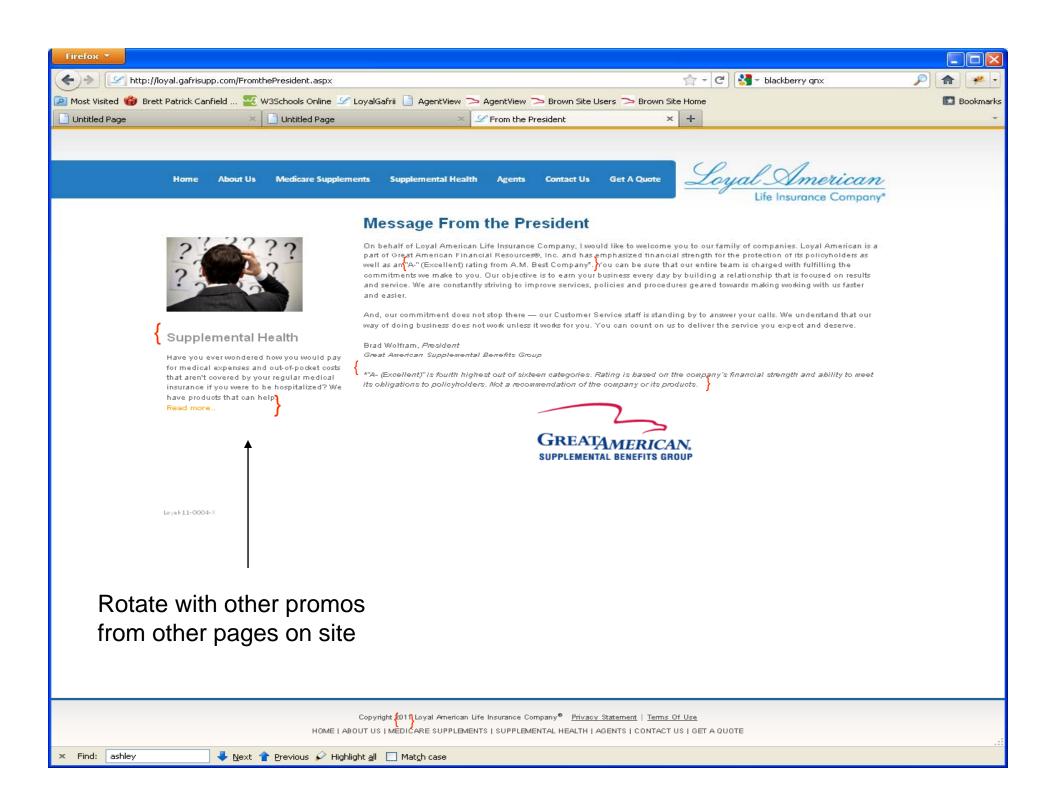
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AL, AR, AZ, CO, GA, IA, IL, IN, KS, KY, MI, MO, MS, MT, ND, NH, NM, OH, OK, OR, SD. TX, UT, VA, WV

#### EXCLUSIONS AND LIMITATIONS

The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

- Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the
  absence of insurance:
- 2. Any services that are not medically necessary as determined by Medicare;
- Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid):
- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as an additional benefit in the policy:
- 6. Confinement that begins or expenses incurred while your policy is not in force; or
- PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or received from a physician within six (8) months prior to the policy effective date.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six (6) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six (6) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a six (6) month waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.

#### back to top

#### ID

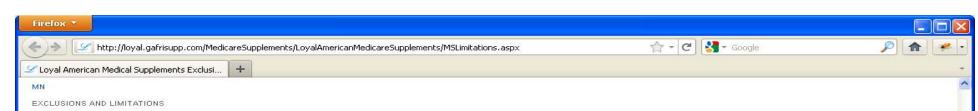
#### EXCLUSIONS AND LIMITATIONS

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- Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the
  absence of insurance:
- 2. Any services that are not medically necessary as determined by Medicare;
- 3. Any portion of any expense for which payment is made by Medicare or other government programs (except Medicard):
- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as a benefit in the policy;
- 6. Expenses incurred while your policy is not in force; or
- 7. PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or received from a physician within six (6) months before the effective date of coverage.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six (6) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six (6) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a six (6) month waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.



The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

- Any expense which you are not obligated to pay; or services for which no charge is normally made in the absence
  of insurance:
- 2. Any services that are not medically necessary as determined by Medicare;
- Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid);
- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as a benefit in the policy;
- 6. Confinement that begins or expenses incurred while your policy is not in force; or
- 7. Expense resulting from a pre-existing condition is not covered unless it is incurred 6 months or more after the coverage effective date. A pre-existing condition is one: (a) for which medical advice was given or treatment was recommended by or received from a physician within 90 days or less before your coverage effective date; and (b) which would not have caused us to deny issuing your policy had it been named on your application.

This provision does not apply if, as of the date of application, you had a continuous period of creditable coverage or had prior coverage under a Medicare supplement policy for at least six (6) months. If, as of the date of application, you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If this policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied. This provision does not apply if you applied for and were issued this policy under guaranteed issue status.

#### back to top

#### NC

#### EXCLUSIONS AND LIMITATIONS

The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

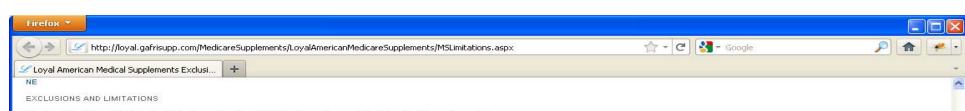
- 1. Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the absence of insurance:
- 2. Any services that are not medically necessary as determined by Medicare;
- Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid);
- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as an additional benefit in the policy;
- 8. Confinement that begins or expenses incurred while your policy is not in force; or
- PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or received from a physician within six (6) months prior to the policy effective date.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six (6) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six (8) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a six (8) month waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.

#### back to top

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The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

- 1. Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the
- 2. Any services that are not medically necessary as determined by Medicare;
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- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as an additional benefit in the policy;
- 6. Confinement that begins or expenses incurred while your policy is not in force; or
- PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or
  received from a physician within six (6) months before the effective date of coverage.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six(B) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six(B) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a six(B) month waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.

#### back to top

#### PA, SC

#### EXCLUSIONS AND LIMITATIONS

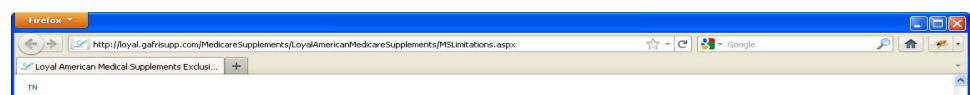
The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

- Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the absence of insurance;
- 2. Any services that are not medically necessary as determined by Medicare;
- Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid);
- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as a benefit in the policy:
- 6. Confinement that begins or expenses incurred while your policy is not in force; or
- 7. PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or received from a physician within six (6) months prior to the policy effective date.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six(6) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six(6) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a six(6) month waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.

#### back to top



#### **EXCLUSIONS AND LIMITATIONS**

The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

- Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the
  absence of insurance;
- 2. Any services that are not medically necessary as determined by Medicare;
- Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid):
- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as an additional benefit in the policy:
- 6. Confinement that begins or expenses incurred while the policy is not in force; or

LIMITATIONS (PRE-EXISTING CONDITION): A condition for which medical advice was given or treatment was recommended by or received from a physician within six (6) months prior to the policy effective date.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six (8) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six (8) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a six (8) month waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.

#### back to top

#### W

#### EXCLUSIONS AND LIMITATIONS

The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

- 1. Nursing home care costs beyond what is covered by Medicare and the Wisconsin mandated 30-day skilled nursing
- Home health care visits above the number of visits covered by Medicare and the 40 visits shown, in the policy, unless the optional Additional Home Health Care Rider is purchased.
- 3. Physician charges above Medicare's approved charge, unless the optional Medicare Part B Excess Charges Rider is
- 4. Outpatient prescription drugs;
- 5. Most care received outside the USA, unless the optional Foreign Travel Emergency Rider is purchased;
- Dental care (except anesthesia charges for dental care provided in a hospital or ambulatory surgery center), dentures, checkups, routine immunizations, cosmetic surgery, routine foot care, examinations for and the cost of eyeglasses or hearing aids, unless eligible by Medicare;
- Any expense incurred in excess of the usual and customary charge or not medically necessary as determined by us for all required Wisconsin mandated benefits:
- 8. Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the absence of insurance:
- 9. Any services that are not medically necessary as determined by Medicare;
- Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid);
- 11. Any type of expense not a Medicare eligible expense except as provided in the policy;
- PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or
  received from a physician within six (6) months prior to the policy effective date.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six (6) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six (6) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a



- 4. Outpatient prescription drugs;
- 5. Most care received outside the USA, unless the optional Foreign Travel Emergency Rider is purchased:
- 6. Dental care (except anesthesia charges for dental care provided in a hospital or ambulatory surgery center), dentures, checkups, routine immunizations, cosmetic surgery, routine foot care, examinations for and the cost of eyeglasses or hearing aids, unless eligible by Medicare;
- 7. Any expense incurred in excess of the usual and customary charge or not medically necessary as determined by us for all required Wisconsin mandated benefits:
- 8. Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the absence of insurance;
- 9. Any services that are not medically necessary as determined by Medicare:
- 10. Any portion of any expense for which payment is made by Medicare or other government programs (except Medicaid):
- 11. Any type of expense not a Medicare eligible expense except as provided in the policy;
- 12. PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or received from a physician within six (6) months prior to the policy effective date.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first six (6) months from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least six (6) months of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a six (6) month waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than six (6) months prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.

PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or received from a physician within six (6) months prior to the policy effective date.

#### back to top

The benefits of the policy will not duplicate any benefits paid by Medicare. The combined benefits of the policy and the benefits paid by Medicare may not exceed one-hundred percent (100%) of the Medicare eligible expenses incurred. The policy will not pay benefits for the following:

- 1. Any expense which you are not legally obligated to pay; or services for which no charge is normally made in the absence of insurance:
- 2. Any services that are not medically necessary as determined by Medicare;
- 3. Any portion of any expense for which payment is made by Medicare or other government programs (except
- 4. Any type of expense not a Medicare eligible expense except as provided in the policy;
- 5. Any deductible, co-insurance or co-payment not covered by Medicare, unless such coverage is listed as a benefit in the policy:
- 6. Confinement that begins or expenses incurred while your policy is not in force; or
- 7. PRE-EXISTING CONDITION: A condition for which medical advice was given or treatment was recommended by or received from a physician within ninety (90) days prior to the policy effective date.

We will not pay for any expenses incurred for care or treatment of a pre-existing condition for the first ninety (90) days from the effective date of coverage. This exclusion does not apply if you applied for and were issued the policy under guaranteed issue status; if on the date of application for the policy you had at least ninety (90) days of prior creditable coverage; or, if the policy is replacing another Medicare supplement policy and a ninety (90) day waiting period has already been satisfied. Evidence of prior coverage or replacement must have been disclosed on the application for the policy.

If you had less than ninety (90) days prior creditable coverage, the pre-existing conditions limitation will be reduced by the aggregate amount of creditable coverage. If the policy is replacing another Medicare supplement policy, credit will be given for any portion of the waiting period that has been satisfied.

#### back to top

Company Tracking Number: LOYAL-11-0004

TOI: MS08I Individual Medicare Supplement - Sub-TOI: MS08I.001 Plan A 2010

Standard Plans 2010

Product Name: Loyal American Website

Project Name/Number: Loyal Medicare Supplement/LOYAL-11-0004

## **Supporting Document Schedules**

Item Status: Status

Date:

Satisfied - Item: Statement of Variability Filed-Closed 09/08/2011

Comments: Attachment:

Statement of Variability.pdf

## Statement of Variability Loyal American Life Insurance company

The following items are indicated as variable items in on the website:

Page	Variable Items	Justification
All	Copyright Date	The Copyright Date is marked as variable so we can update that as necessary without having to re-file the website.
All	Promotions	The promotions have been marked as variable so we will be able to rotate different promotions on this page. Each promotion is shown throughout this website. We will not use a promotion that has not been approved by your department of insurance.
Home Page LOYAL-11-0004-A	Policyholder Login	The Policyholder login has been marked as variable so we can remove it from this home page if necessary. The information listed will not change.
Home Page LOYAL-11-0004-A About Us – Financial Strength LOYAL-11-0004-C; Message from the President LOYAL-11- 0004-X	;AM Best Rating	The AM Best Rating information has been marked as variable so we can update the rating as necessary without having to re-file the website page.
About Us LOYAL-11-0004-B		The description of our family of companies' information has been marked as variable so we will be able to update the statistics listed without having to re-file for approval.
About Us Why Loyal American LOYAL-11-0004-D		The information listed next to the heading "Experience" has been marked as variable so we will be able to update the statistics listed without having to re-file for approval. The source for the statistics has also been marked as variable so we may update that as well when newer information becomes available.
Medicare Supplement Insurance LOYAL-11-0004-E		The Medicare information relating to the 10 standardized plans the percentage Medicare will pay and the percentage you are responsible has been marked as variable should this information change again by the federal government, we will be able to update the information without having to re-file for approval.
Medicare Supplement Insurance LOYAL-11-0004-E		The Medicare Chart showing all of the plans available has been marked as variable so we can update the chart should it ever change again without having to re-file for approval.
What is Medicare? LOYAL-11- 0004-F	Medicare & You Guide	The Medicare & You Guide 2011 has been marked as variable so we can update this link every year when each new Medicare & You Guide comes out.
Medicare Supplement – Part B LOYAL-11-0004-H	80% of Part B, etc	The information regarding what percentage Part B covers and what percentage you are responsible for has been marked as variable so we can update this information should it ever change again by the federal government without having to re-file for approval.
Medicare Supplement – Part D LOYAL-11-0004-J	<u>.gov</u> and Medicare & You Guide	The Medicare website and the Medicare & You Guide 2011 have been marked as variable so we may update the link to the Medicare website should it ever change without having to re-file the website. We would also like to update the Guide each year it comes out without having to re-file for approval.
Loyal American Medicare Supplements LOYAL-11-0004-k		The Policy issue average days and the average claim processing days have been marked as variable so we can update this information has necessary without having to re-file the website.

Loyal American Medicare Supplements LOYAL-11-0004-K		Any reference to the Medicare Supplement insurance plans that Loyal American currently offers has been marked as variable should we decide not to offer one of the plans in the future we would be able to update the website without having to re-file for approval.
All applicable web pages	Statistics	The statistics have been marked as variable on this page so we can update them as necessary without having to re-file for approval. The sources for the statistics are also marked as variable so we may also update those as well without having to re-file for approval.
Supplemental Insurance Page LOYAL-11-0004-L	Rider Information	The ROP and Cash Value rider information shown at the bottom of the form has been marked as variable so we can remove this information if we decide to stop selling this rider without having to re-file for approval.
Affordable Health Benefits LOYAL-11-0004-N		The 4 plan options we have available as well as the benefit amounts for those plans have been marked as variable so we can remove any of the benefit plan options should be choose not to offer those any longer without having to re-file for approval.
Cancer Insurance LOYAL-11- 0004-P ; Protection Plus – Hospital Confinement LOYAL- 11-0004-M	Benefit Amounts	The benefit amount shown on this page has been marked as variable so we can change the benefit amounts based on what is approved by the department of insurance. We may also choose not to offer a certain benefit amount and would like the ability to remove it without having to refile for approval.
Protection Plus – Hospital Confinement LOYAL-11-0004-M	Issue Ages	The Issue ages for this product have been marked variable so we can change them if necessary without re-filing for approval.
Prospective Agents LOYAL-11- 0004-Y	Processing times and extra benefits	The New Business processing time, the language for our ExpressApp program as well as the Agentview website have been marked as variable so we can update or change this information as necessary without having to re-file for approval.
Prospective Agents LOYAL-11- 0004-Y	Existing Agent login	The Existing Agent log in area has also been marked as variable so we can remove this option if needed without having to re-file for approval.
Prospective Agents Contact Page LOYAL-11-0004-Y	Products and Contact Phone Number	The products listed have been marked as variable so we can remove any products as needed should we stop marketing them sometime in the future without having to re-file for approval. Our contact phone number has also been marked bracketed so we can update the phone number should it ever change in the future without having to re-file for approval.
Contact Us LOYAL-11-0004-T	Contact Information	Our contact information has been marked as variable on this page in case our contact information should change, we would like to be able to update this information without having to re-file for approval.
Get A Quote LOYAL-11-0004-U	Information	We have marked our contact information as variable so we can update this information should it change in the future without having to re-file for approval. We have also marked the drop down menu of our products variable so we can remove any products from the list should we stop marketing any in the future without having to re-file for approval.
Privacy Statement LOYAL-11- 0004-V	Privacy Notices	We have marked our privacy statement and notice as variable should those ever change based on regulations in the future without having to refile for approval.